

## **Incident Report**

Print Date/Time: 09/07/2016 10:34

Login ID: ss0100 Lake Stevens Police Department

**ORI Number:** WA0311900

Incident: 2016-00017228

Incident Date/Time: 8/30/2016 11:03:45 PM

Location: 8415 9TH PL NE

LAKE STEVENS WA 98258

Phone Number: (425) 610-3847

Report Required: Yes Prior Hazards: No

LE Case Number:

Incident Type:

Collision

Venue: Lake Stevens

Source: 911 Priority: 3F 3 Status:

Nature of Call:

Unit/Personnel

Unit Personnel SS0136-Shein 19N2

19N3 SS0144-Michael 19S12 SS0079-Summers

Person(s)

1

No. Role Address Phone Name

Sex DOB Race

Reporting Party HOLLOWAY, JANSON L 03/26/1988

Reporting Party CRIM, MITCH (425) 610-3847 2

Vehicle(s)

Role Year Make Model Color License State Type

Involved Vehicle AGJ4877 Involved Vehicle ATC4106

Disposition(s)

Disposition Count

S 1 R

Property

Date Code Type Make Model Description Tag No. Item No.

## **CAD Narrative**

08/30/2016: 23:55:01 SP0352 Narrative: W/MALE COURT TRANS

08/30/2016: 23:32:36 SP0352 Narrative: TOW OS

08/30/2016: 23:19:02 SP0352 Narrative: RESCUE TOW ENRT OWNERS REQ

 $08/30/2016: 23:16:08\ SP0352\ Narrative:\ OWNERS\ REQ\ FOR\ RESCUE\ TOWING\ ,\ WILL\ NEED\ FLATBED\ ,\ VEH\ ON\ IT'S\ ROOF,$ 

NO TIRES

08/30/2016: 23:12:24 SP0387 Narrative: 1 GRN PT

08/30/2016: 23:10:48 SP0387 Narrative: 1 VEH ROLL, ON TOP, BLKING, WITH LKS PD,

08/30/2016: 23:08:57 SP0352 Narrative: 19N2 VEHS BLKING THE RDWY

08/30/2016: 23:08:19 SP0352 Narrative: \*\*\* 19N3 ADVISING CAN BE BLS \*\*\*

08/30/2016: 23:08:14 SP0387 Narrative: E82 - TEXT ADV NON INJ, CXL M82

08/30/2016: 23:07:32 SP0352 Narrative: UPDATES GIVEN

08/30/2016 : 23:06:40 SP0339 Narrative: THIS RP L/FOBIAN LISA 425-210-1684

08/30/2016: 23:06:09 SP0427 Narrative: NEW RP ADV NO INJ

08/30/2016: 23:06:02 SP0339 Narrative: NEW RP CALLING IN VEH ROLLED OVER AND TOOK OUT A TREE

08/30/2016 : 23:05:58 SP0387 Narrative: ANOTHER CALLER DAYING ON LUNDEEN PKWY BETWN VERNON AND THE

**BRIDGE** 

08/30/2016: 23:05:55 SP0291 Narrative: ANOTHER RP ADV ROLLOVER, POSS RED STATION WAGON

08/30/2016: 23:05:52 SP0321 Narrative: another rp adv same, on lundeen, 1 flipped into tree. cheryl 2066792370,

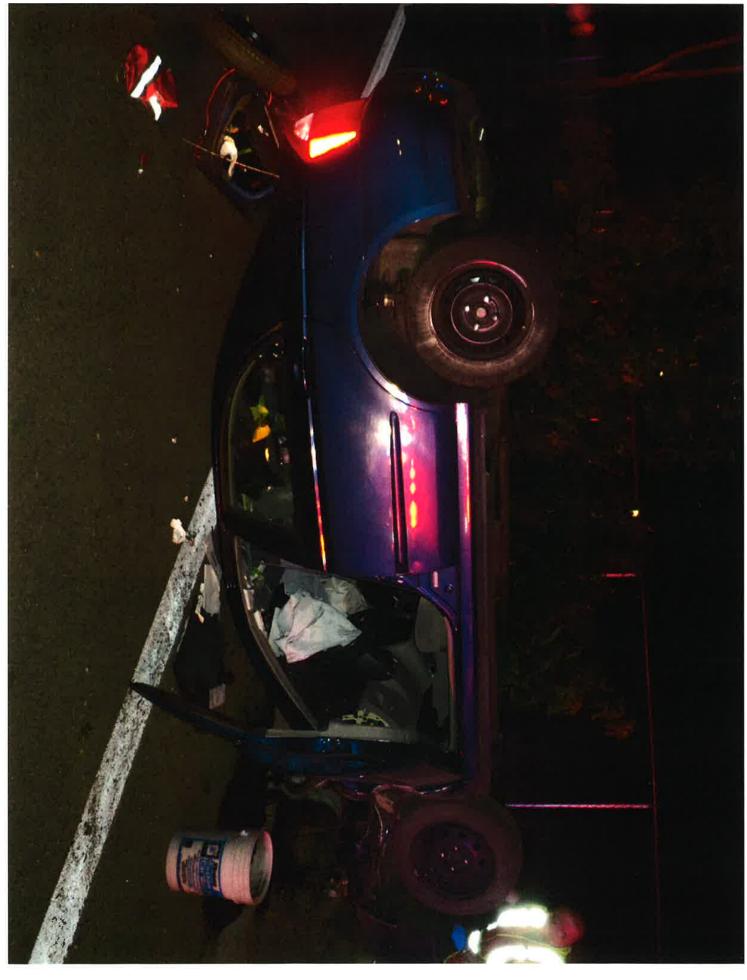
08/30/2016: 23:05:19 SP0339 Narrative: RP NOW SAYING IT COULD BE ONE VEH COL. LR339

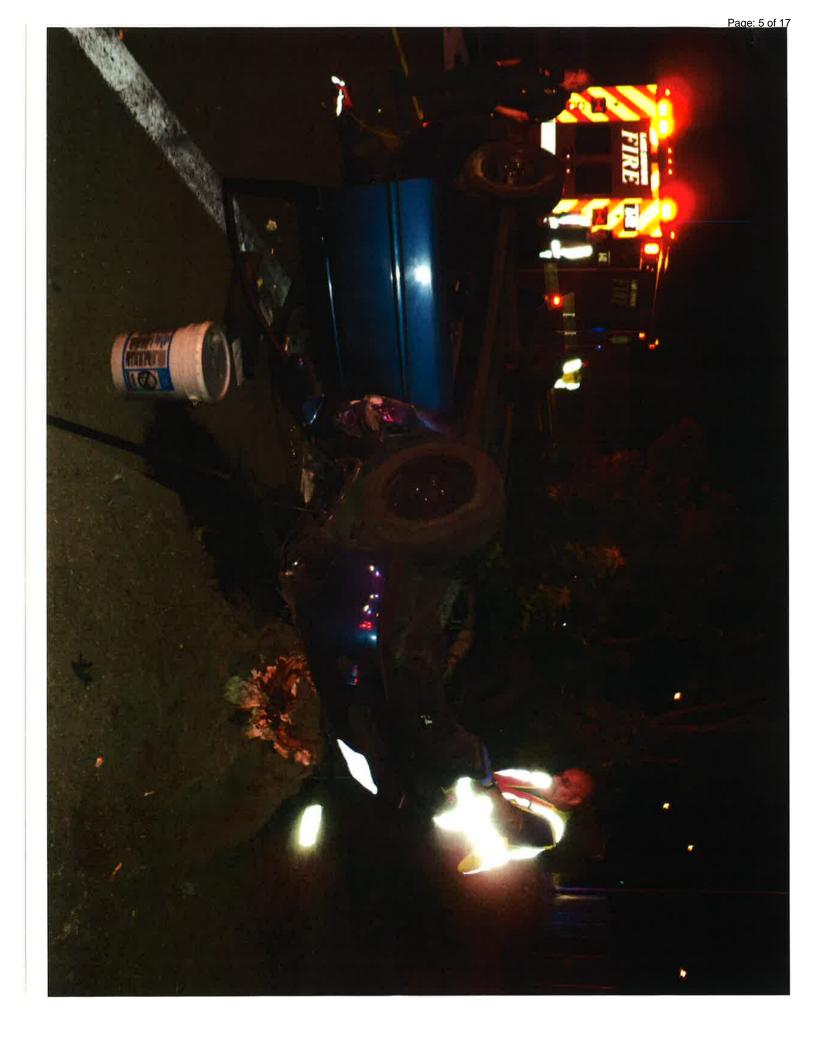
08/30/2016: 23:04:30 SP0352 Narrative: BCST

08/30/2016: 23:04:26 SP0339 Narrative: RP ONLY HEARD, N/D ON VEHS

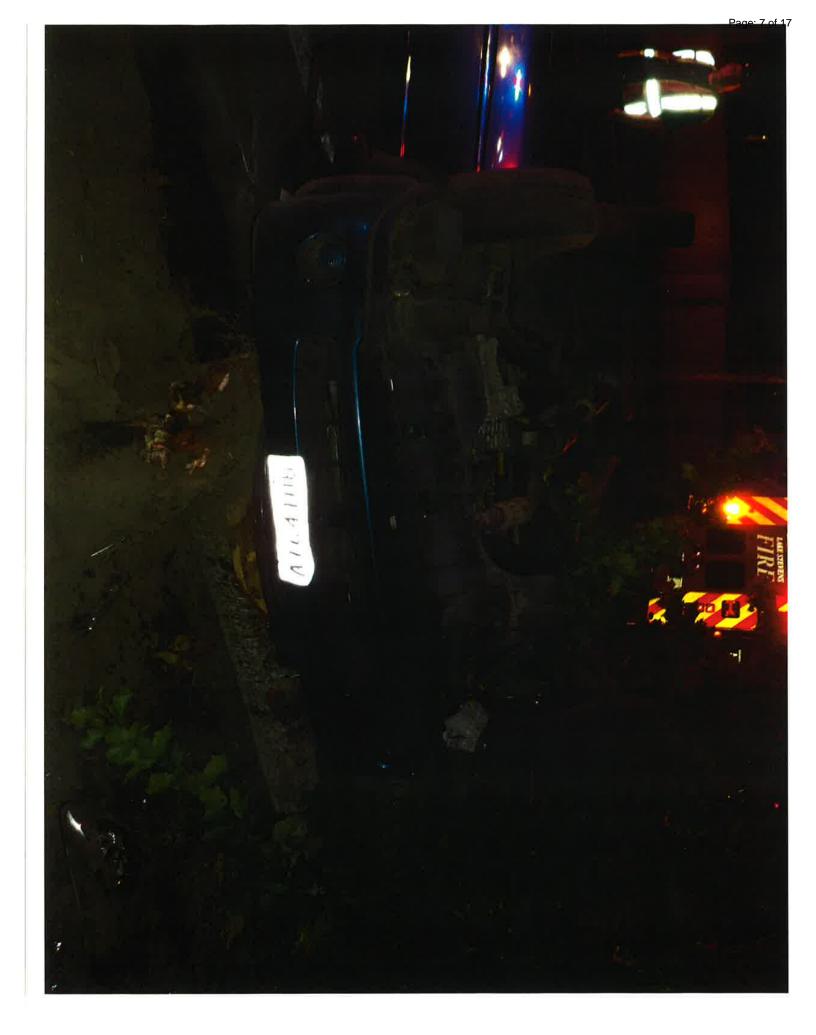
08/30/2016: 23:04:09 SP0339 Narrative: AC,NOW, 2 VEH COL ON LUNDEEN, ONLY HEARING, UNK INJ

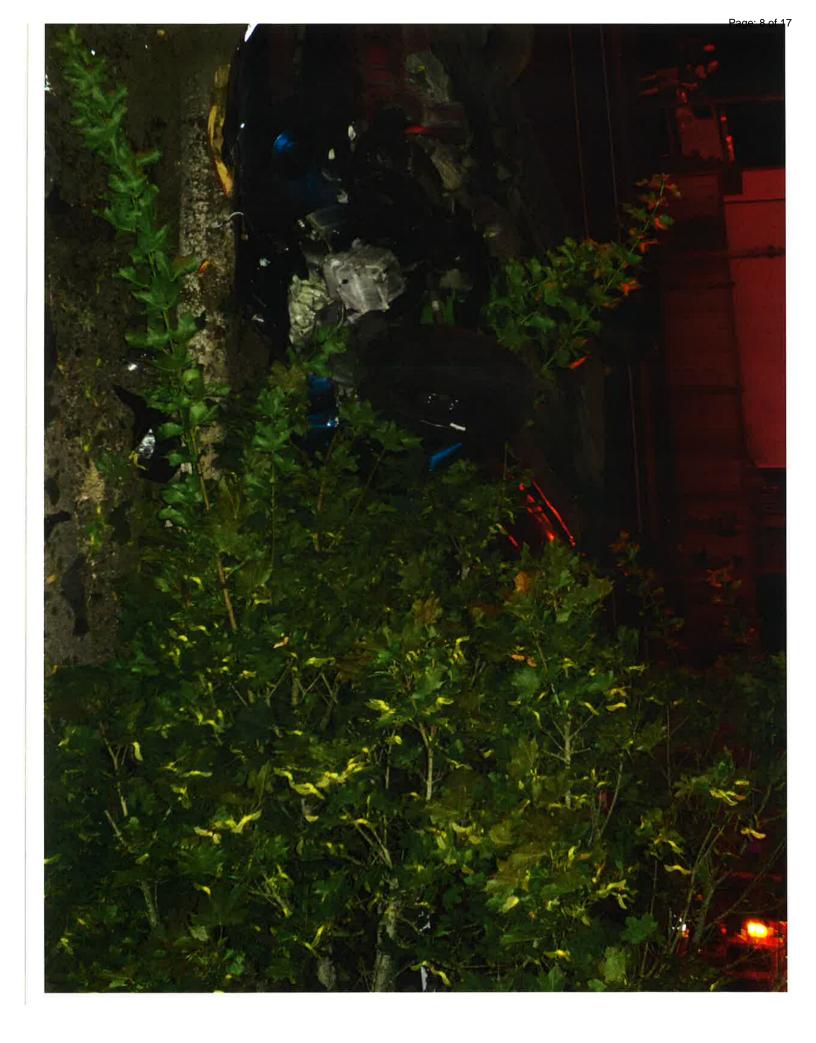
3000-110-076 (R 07/13) NON-IMPOUND/TOW	12	UMP	JKIVI VVAST	HINGTH	JIN'STA	AIE I	JU.	16-00017228		
AAA or OTHER ROADSIDE	ASSISTANCE					L		.0 00017220		
EVIDENCE		TOW / IMPOUND								
SEIZED UNDER RCW 69.50	AND INVENTORY RECORD									
IMPOUND ONLY	HOUDINGLE									
DUI/PC IMPOUND WITH 12										
INFORMATIONAL COPY GIVEN		VEHICLE INFORMATION								
REGISTERED OWNER MAY RE		VIN		1181118111111	201100   1021002011)					
CHECK INDICATES DRIVER IS I	DWLS/R AND IS NOT THE	KINIAIF	E   1   2   1	0.5	5   1   4	13101611				
REGISTERED OWNER REGIST OWNER OR AGENT OF THE OV	WER MAY REDEEM AT	LICENSE		YEAR	MAKE		MODEL			
THE END OF THE IMPOUND HO CHECK INDICATES THE DRIVER	ATC4106	WASHINGT		2005	KIA		SPECTRA			
REGISTERED OWNER THEY WARELEASE FORM FROM THE CO	Report of Sa	MILEAGE UNREAD	Digital ABLE	3 DC	: OOR COUPE		COLOR BLUE			
DRIVER	1		REGISTERED OWNER LEGAL OWNER							
NAME (LAST, FIRST, MI)	IXCOHIQUIONGE INCLESSIONES	NAME (LAST, FIR	ST, MI)			NAME (LAST	NAME (LAST, FIRST, MI)			
HOLLOWAY, JANSON	IL	HOLLOWAY	JANSON L				LEGAL SAME			
STREET ADDRESS 2614 SOPER HILL RD		STREET ADDRES	SS			STREET ADD	STREET ADDRESS			
CITY, STATE, ZIP CODE		CITY, STATE, ZIP	CODE			CITY, STATE	ZIP CODE			
LAKE STEVENS, WAS	982584234	LAKE STEVE		258		3111,01715	0000			
PHONE	дов 3/26/1988	PHONE (360)820-29		PHONE	PHONE					
			HORIZATION	AND REC	EIPT					
LOCKED TRUNK LOCKED GLOVE BOX LOCKED CENTER CONSOL AUTO STEREO [ ] DISC(S) HANDS FREE DEVICE GPS RADAR / LIDAR DETECTOR SPARE TIRE JACK CHAINS	L FRONT L SIDE L REAR REAR	RRIAGE								
OTHER			i i					termedical contract (Observation Colored		
	INVENTORY					NARRATIVE	OR DIAGR	MAS		
ASSORTED CLO	THING AND P	PERSONAL	ITEMS	Owne	er's req	(List reasons uest tow	(s) for impound.	)		
***************************************	***************************************	***************************************			144734444444444444444444444444444444444					
		***************************************	enner (1) veren (1ere) to				drieweddinoond	)) ****(*) ****************************		
***************************************	***************************************					***************************************		***********************************		
I PROVIDED A COPY OF	THIS TOW/ / IMPOUND	REPORT TO THE	TOWING FIRM'S	OPERAT		OOK BOSSESSIO	N OF THE VE	HICLE		
I PROVIDED A COPY OF										
DRIVERS TO REDEEM IM						CLE WAS ABANDO VAS LEFT WITH T		PY OF THE TOW / IMPOUN		
I CERTIFY (DECLARE) UN TRUE AND CORRECT (RO	IDER PENALTY OF	PERJURY UNDE	ER THE LAWS	OF THE	STATE O	F WASHINGTON	N THAT THE	FOREMENTIONED IS		
OFFICER'S ELECTRONIC BIGNATURE  A.	Michael #0144	SA	VOHOMISH, WA			0144 L	ake Stevens	PD		
3000 110 076 (D 07/13)			COUNTY, WA			BADGE NO.	AGENCY	· -		





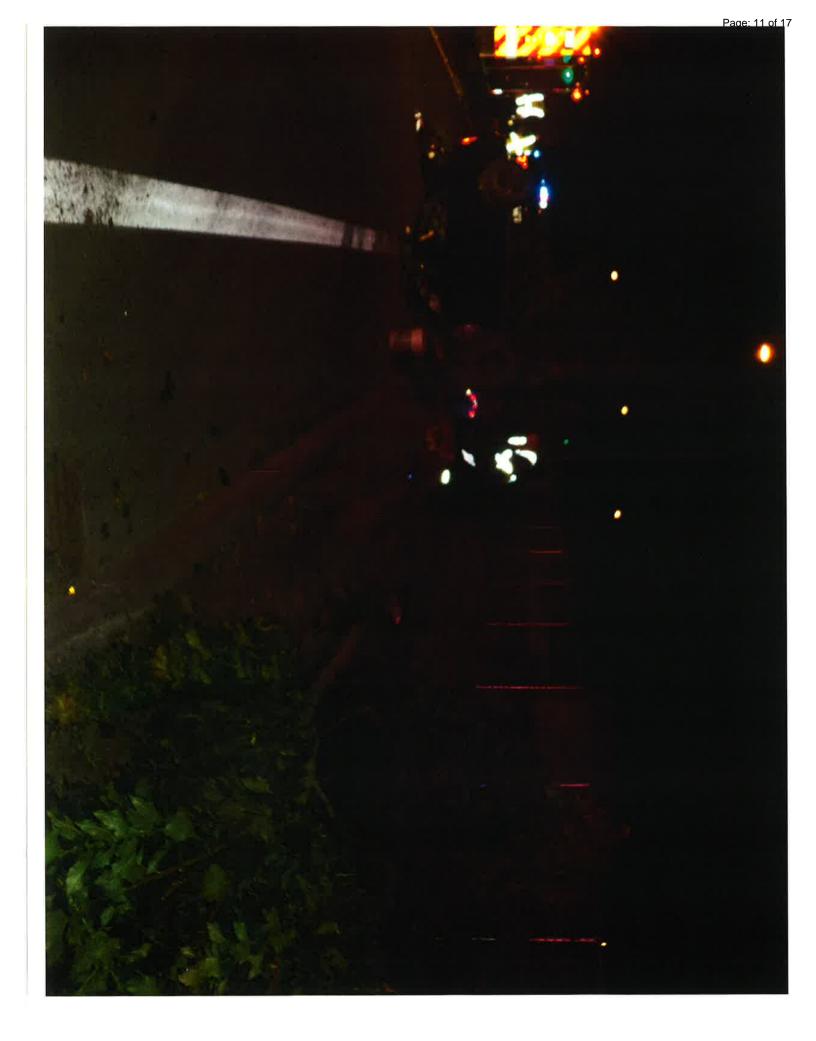


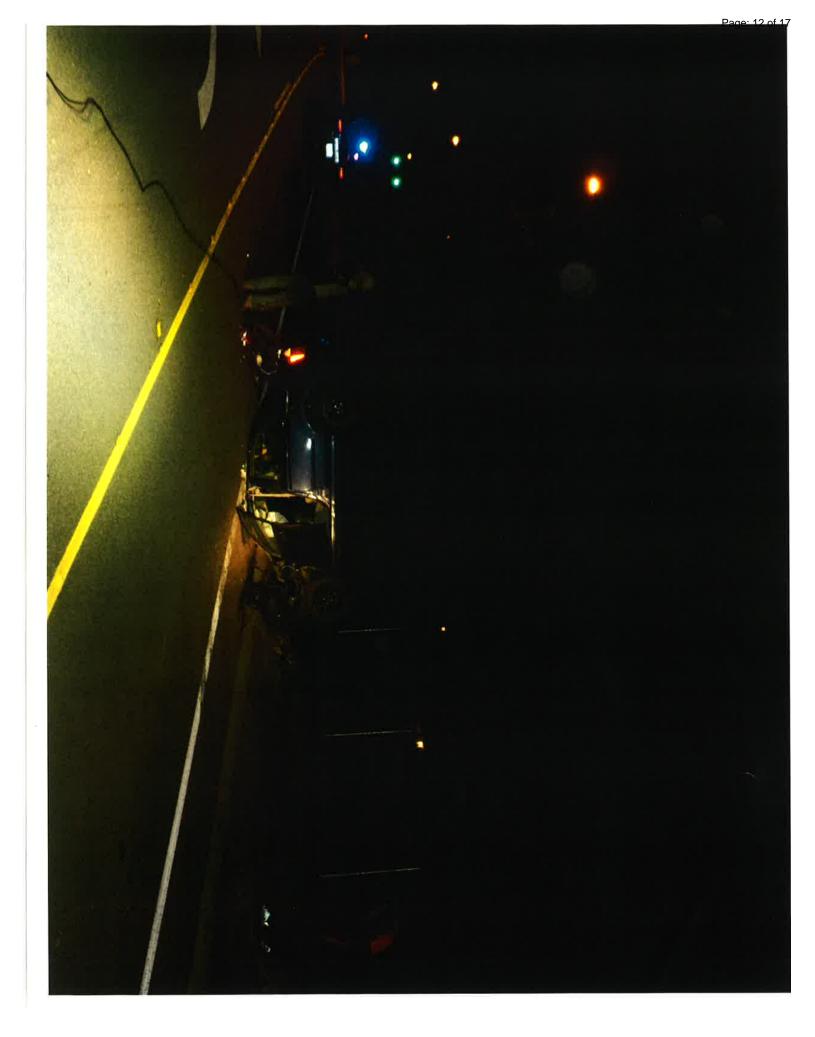


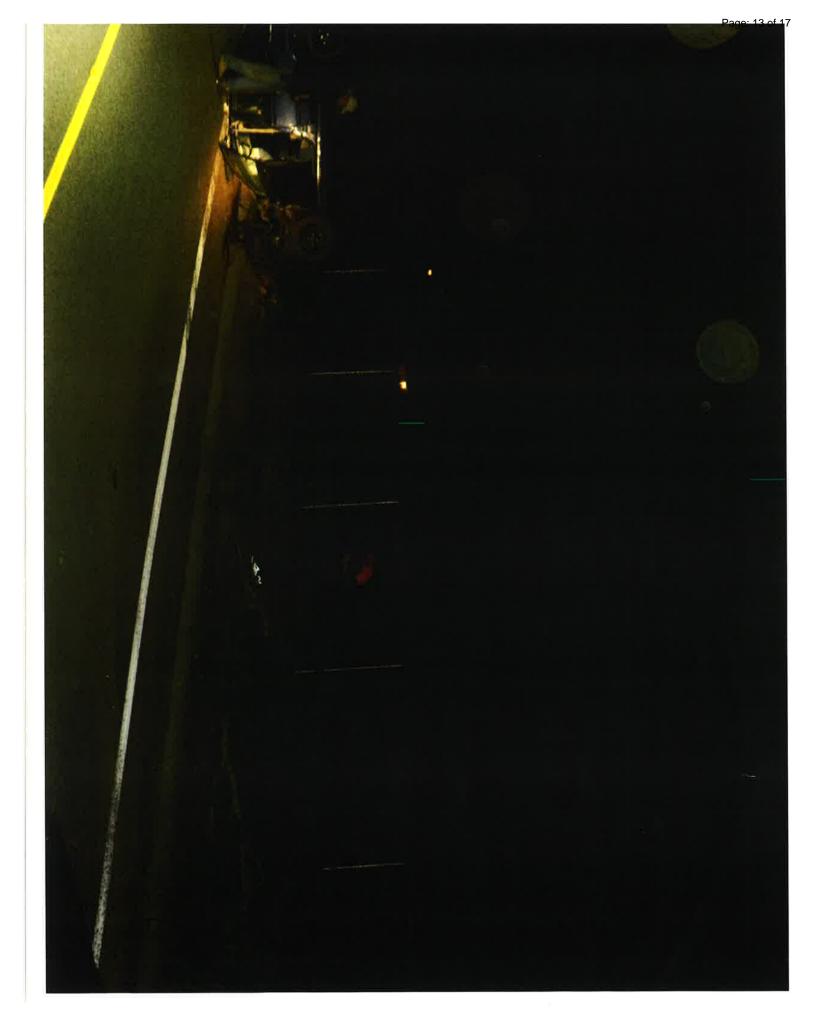


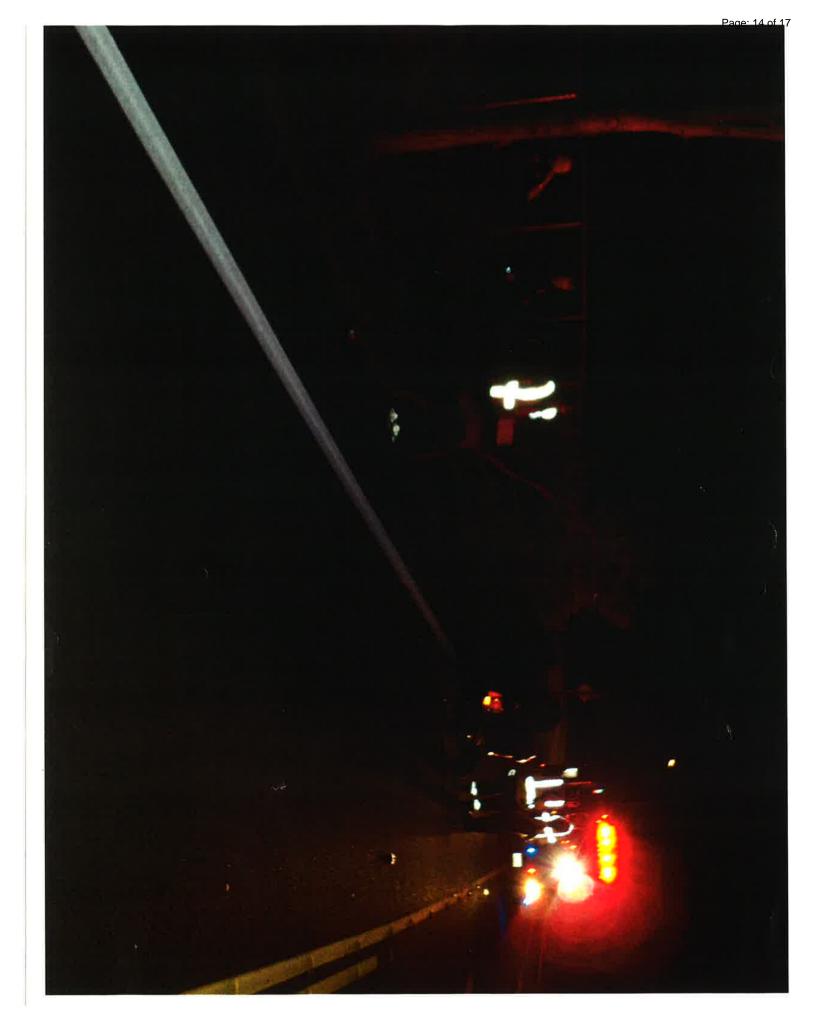












## **COLLISION REPORT**

(C)	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E579671	1 4 27								
1850	INTERSTATE CITY STREET V RESULTED 2									
1 1	STATE ROUTE OTHER DISTOLEN VEHICLE LOCAL AGENCY CODING									
2 1	COUNTY RD PRIVATE WAY INVOLVED TOTAL # OF OBJECT	28								
-4	TRIBAL RESERVATION  M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#									
3	M M D D Y Y Y Y TIME (2400) COUNTY# MILES  OATE OF COLLISION 08 - 30 - 2016 2303 31 31 S W OF 0664 3									
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO.									
4a	MILE POST MILE P	0 1 29								
5	OF (REFERENCE OR CROSS STREET)  50 MILES N V E STH PL SE FEET S S W									
	UNIT 01 MOTOR PEDAL- CYCLE DAMAGE THRESHOLD MET YES NO NO PHONE	30								
6	LAST NAME HOLLOWAY FIRST NAME JANSON MIDDLE INITIAL L									
	STREET NEW ADDRESS  2614 SOPER HILL RD									
7		1 2 31								
8	CDL RESTRICTIONS B ENDORSEMENTS 2	$\exists$								
	DRIVER'S HOLLO, II 123D6 STATE WA SEV M D.O.B. 03 26 1988 3									
9 9		32								
10	USE CLASS CUIS AND BRUISES									
11 3 5	PLATE # VIIV# 3									
12	TRAILER PLATE # STATE STATE STATE									
13 4	REGISTERED OWNER INFO. OWNED BY DRIVER  VEHICLE NO. 1	5 1 33								
14	LIABILITY INSURANCE IN EFFECT OREGON MUTUAL WP748639	FROM TO								
15 2	VEHICLE YES NO CITATION # CHARGE  CHARGE  CHARGE  CHARGE  CHARGE  PROPERTY   DAMAGE THRESHOLD MET   PHONE									
16	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY OWNER PHONE PHONE	4 35								
	LAST NAME CITY OF LAKE STEVENS FIRST NAME MIDDLE INITIAL	36								
17	STREET NEW ADDRESS 1812 MAIN ST	37								
18	CITY LAKE STEVENS ST WA ZIP 98258	38								
19	CDL RESTRICTIONS ENDORSEMENTS	39								
20	DRIVER'S LICENSE # SEX U D.O.B. MDDYYYY	40								
21	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET INJURY CLASS CLASS									
22	LICENSE PLATE # STATE VIN#									
23	TRAILER PLATE # STATE PLATE # STATE	41								
24	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED TOWED BY GOVET-VEHICLE YES NO Y	42								
- '	REGISTERED OWNER INFO.  VEHICLE NO. 2 SHADE IN DAMAGED AREA  2 3 4  LISSIBANCE CO.									
	LIABILITY INSURANCE INSURANCE CO & POLICY #  VEHICLE YES INC CITATION #  CHARGE  CHARGE  CHARGE									
25	STANDING									
26	PAGE 01 OF 3									





CORRECTION

REPORT NO.

E579671

 CASE #

2016-00017228

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)												
NAME (LAST, FIRST, MIDDLE	INITIAL)											
ADDRESS & PHONE #							SEX		D.O.B. MMDDYYYY			
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HEL US	MET SE	INJURY CLASS		NATURE OF INJU	JRIES
NAME (LAST, FIRST, MIDDLE	INITIAL)											
ADDRESS & PHONE #							SEX		D.O.B. MMDDYYYY		_	
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HEL US		INJURY CLASS		NATURE OF INJU	JRIES
NAME (LAST, FIRST, MIDDLE	INITIAL)											
ADDRESS & PHONE #							SEX		D.O.B. MMDDYYYY			
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HEL US	MET SE	INJURY CLASS		NATURE OF INJU	JRIES
NARRATIVE												
V1 was northbound on Lundeen Pkwy. At approximately the intersection of Lundeen Pkwy and 8th Pl NE, the driver of V1 fell asleep.												
Driver of V1 stated that he did not notice he was going off the roadway until he struck the first tree. Striking this tree with the front right portion of the car caused the vehicle to roll. The roll of the vehicle destroyed the tree that was struck and eventually struck another tree, which caused the vehicle to come to a stop.  Driver of V1 was unhurt beside a few obvious cuts and bruises to hands and chest. No impairment was detected on the driver.												
A. MICHAEL #0	FICER'S SIGNATURE	DF PERJURY	UNDER THE LAWS  UNIT OR DIST. D			6 05:39 AM	DATE	PLAC	NG IS TRUE AI DE SIGNED		RECT. (RCW 9A	.72.085)
BADGE OR ID #	0144	ORI#	WA0311900			TIME POLICE D	DISPATCHED	11:0	04 PM	TIME P	OLICE ARRIVED	11:06 PM

**REPORT NO.** E579671 CASE# 2016-00017228

